

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Approved for use through 9/30/00. OMB 0651-0033  
Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

# REISSUE APPLICATION DECLARATION BY THE INVENTOR

Docket Number (Optional)

87-146R

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is described and claimed in patent number 5,634,448, granted June 3, 1997, and for which a reissue patent is sought on the invention entitled Method And Structure For Controlling An Apparatus, Such As A Fuel Injector, Using Electronic Trimming, the specification of which

☐ is attached hereto.

☒ was filed on May 28, 1999 as reissue application number 09 / 322,770 and was amended on 2/21/01 and 3/21/01.  
(If applicable)

I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I verily believe the original patent to be wholly or partly inoperative or invalid, for the reasons described below. (Check all boxes that apply.)

☐ by reason of a defective specification or drawing.

☒ by reason of the patentee claiming more or less than he had the right to claim in the patent.

☐ by reason of other errors.

At least one error upon which reissue is based is described as follows:

The original patent is partly inoperative for failing to include a device claim.

RECEIVED

AUG 16 2001

TECHNOLOGY CENTER ROSTON

[Page 1 of 3]

Burden Hour Statement: This form is estimated to take 0.5 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

(REISSUE APPLICATION DECLARATION BY THE INVENTOR, page 2)

Docket Number (Optional)  
87-146R

All errors corrected in this reissue application arose without any deceptive intention on the part of the applicant. As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

Name(s)	Registration Number
Michael McNeil	35,949
Michael Huber	44,783
Larry Cain	31,150

Correspondence Address: Direct all communications about the application to:

☐ Customer Number

OR

Type Customer Number here

Place Customer Number Bar  
Code Label here

<input checked="" type="checkbox"/> Firm or Individual Name	Michael McNeil			
Address	Liell & McNeil Attorneys PC			
Address	P.O. Box 2417			
City	Bloomington	State	IN	ZIP 47402
Country	United States			
Telephone	812-333-5355	Fax	812-333-3173	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine and imprisonment, or both, under 18 U.S.C. 1001, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this declaration is directed.

Full name of sole or first inventor (given name, family name)  
Ronald D. Shinogle

Inventor's signature *Ronald D. Shinogle*

Residence  
Peoria, Illinois

Date *July 9, 2001*

Post Office Address  
1023 W. Centennial Drive

Citizenship  
US

Full name of second joint inventor (given name, family name)  
Stephen F. Glassey

Inventor's signature

Date

Residence  
Gulnare, Colorado

Citizenship  
US

Post Office Address  
21750 Spirit Mountain D

Full name of third joint inventor (given name, family name)  
Richard A. De Keyser

Inventor's signature

Date

Residence  
Edelstein, Illinois

Citizenship  
US

Post Office Address  
614 Horshoe Tr.

☒ Additional joint inventors are named on separately numbered sheets attached hereto.

RECEIVED

AUG 16 2001

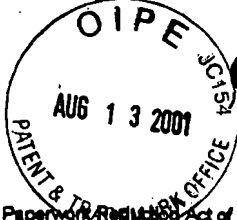
TECHNOLOGY CENTER R3700

Reissue Application Declaration (continued)

Docket Number  
87-146R

Full name of fourth joint inventor: Vernon Smith  
Inventor's Signature: \_\_\_\_\_  
Residence: Peoria, Illinois  
Date: \_\_\_\_\_  
Post Office Address: 708 Mossville Rd.  
Citizenship: US

Full name of fifth joint inventor: Yasser A. Charif  
Inventor's Signature: \_\_\_\_\_  
Residence: Farmington Hills, Michigan  
Date: \_\_\_\_\_  
Post Office Address: 37655 Blossom Lane  
Citizenship: US



# REISSUE APPLICATION DECLARATION BY THE INVENTOR

Docket Number (Optional)

87-146R

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is described and claimed in patent number 5,634,448, granted June 3, 1997, and for which a reissue patent is sought on the invention entitled Method And Structure For Controlling An Apparatus, Such As A Fuel Injector, Using Electronic Trimming, the specification of which

☐ is attached hereto.

☒ was filed on May 28, 1999 as reissue application number 09 / 322,770 and was amended on 2/21/01 and 3/21/01.  
(If applicable)

I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I verily believe the original patent to be wholly or partly inoperative or invalid, for the reasons described below. (Check all boxes that apply.)

☐ by reason of a defective specification or drawing.

☒ by reason of the patentee claiming more or less than he had the right to claim in the patent.

☐ by reason of other errors.

At least one error upon which reissue is based is described as follows:

The original patent is partly inoperative for failing to include a device claim.

RECEIVED

AUG 16 2001

TECHNOLOGY CENTER R3700

[Page 1 of 3]

(REISSUE APPLICATION DECLARATION BY THE INVENTOR, page 2)

Docket Number (Optional)  
87-146R

All errors corrected in this reissue application arose without any deceptive intention on the part of the applicant. As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

Name(s)	Registration Number
Michael McNeil	35,949
Michael Huber	44,783
Larry Cain	31,150

Correspondence Address: Direct all communications about the application to:

☐ Customer Number

OR

Type Customer Number here

Place Customer Number Bar  
Code Label here

<input checked="" type="checkbox"/> Firm or Individual Name	Michael McNeil				
Address	Liell & McNeil Attorneys PC				
Address	P.O. Box 2417				
City	Bloomington	State	IN	ZIP	47402
Country	United States				
Telephone	812-333-5355	Fax	812-333-3173		

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine and imprisonment, or both, under 18 U.S.C. 1001, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this declaration is directed.

Full name of sole or first inventor (given name, family name)

Ronald D. Shinogle

Inventor's signature

Residence Peoria, Illinois	Date
Post Office Address 1023 W. Centennial Drive	Citizenship US

Full name of second joint inventor (given name, family name)

Stephen F. Glassey

Inventor's signature <i>Stephen F. Glassey</i>	Date 7/5/2001
Residence Gulnare, Colorado	Citizenship US
Post Office Address 21750 Spirit Mountain D	

Full name of third joint inventor (given name, family name)

Richard A. De Keyser

Inventor's signature	Date
Residence Edelstein, Illinois	Citizenship US
Post Office Address 614 Horshoe Tr.	

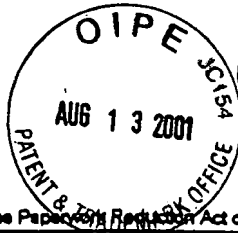
☒ Additional joint inventors are named on separately numbered sheets attached hereto.

Reissue Application Declaration (continued)

Docket Number  
87-146R

Full name of fourth joint inventor: Vernon Smith  
Inventor's Signature: \_\_\_\_\_  
Residence: Peoria, Illinois  
Date: \_\_\_\_\_  
Post Office Address: 708 Mossville Rd.  
Citizenship: US

Full name of fifth joint inventor: Yasser A. Charif  
Inventor's Signature: \_\_\_\_\_  
Residence: Farmington Hills, Michigan  
Date: \_\_\_\_\_  
Post Office Address: 37655 Blossom Lane  
Citizenship: US



Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Approved for use through 9/30/00. OMB 0651-0033  
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

## REISSUE APPLICATION DECLARATION BY THE INVENTOR

Docket Number (Optional)

87-146R

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is described and claimed in patent number 5,634,448, granted June 3, 1997, and for which a reissue patent is sought on the invention entitled Method And Structure For Controlling An Apparatus, Such As A Fuel Injector, Using Electronic Trimming, the specification of which

☐ is attached hereto.

☒ was filed on May 28, 1999 as reissue application number 09 / 322,770 and was amended on 2/21/01 and 3/21/01.  
(If applicable)

I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I verily believe the original patent to be wholly or partly inoperative or invalid, for the reasons described below. (Check all boxes that apply.)

☐ by reason of a defective specification or drawing.

☒ by reason of the patentee claiming more or less than he had the right to claim in the patent.

☐ by reason of other errors.

At least one error upon which reissue is based is described as follows:

The original patent is partly inoperative for failing to include a device claim.

RECEIVED

AUG 16 2001

TECHNOLOGY CENTER R3700

[Page 1 of 3]

Burden Hour Statement: This form is estimated to take 0.5 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

(REISSUE APPLICATION DECLARATION BY THE INVENTOR, page 2)

Docket Number (Optional)  
87-146R

All errors corrected in this reissue application arose without any deceptive intention on the part of the applicant. As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

Name(s)	Registration Number
Michael McNeil	35,949
Michael Huber	44,783
Larry Cain	31,150

Correspondence Address: Direct all communications about the application to:

☐ Customer Number

OR

Type Customer Number here

Place Customer Number Bar  
Code Label here

<input checked="" type="checkbox"/> Firm or Individual Name	Michael McNeil			
Address	Liell & McNeil Attorneys PC			
Address	P.O. Box 2417			
City	Bloomington	State	IN	ZIP 47402
Country	United States			
Telephone	812-333-5355	Fax	812-333-3173	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine and imprisonment, or both, under 18 U.S.C. 1001, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this declaration is directed.

Full name of sole or first inventor (given name, family name)  
Ronald D. Shinogle

Inventor's signature

Residence  
Peoria, Illinois

Date

Post Office Address  
1023 W. Centennial Drive

Citizenship  
US

Full name of second joint inventor (given name, family name)  
Stephen F. Glassey

Inventor's signature

Date

Residence  
Gulnare, Colorado

Citizenship  
US

Post Office Address  
21750 Spirit Mountain D

Full name of third joint inventor (given name, family name)  
Richard A. De Keyser

Inventor's signature

Date

Residence  
Edelstein, Illinois

Citizenship  
US

Post Office Address  
614 Horshoe Tr.

☒ Additional joint inventors are named on separately numbered sheets attached hereto.

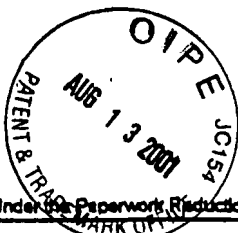


Reissue Application Declaration (continued)

Docket Number  
87-146R

Full name of fourth joint inventor: Vernon Smith  
Inventor's Signature: \_\_\_\_\_  
Residence: Peoria, Illinois  
Date: \_\_\_\_\_  
Post Office Address: 708 Mossville Rd.  
Citizenship: US

Full name of fifth joint inventor: Yasser A. Charif  
Inventor's Signature: \_\_\_\_\_  
Residence: Farmington Hills, Michigan  
Date: \_\_\_\_\_  
Post Office Address: 37655 Blossom Lane  
Citizenship: US



<b>REISSUE APPLICATION DECLARATION BY THE INVENTOR</b>	Docket Number (Optional) 87-146R
--	-------------------------------------

As a below named inventor, I hereby declare that:  
My residence, post office address and citizenship are stated below next to my name.  
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is described and claimed in patent number 5,634,448, granted June 3, 1997, and for which a reissue patent is sought on the invention entitled Method And Structure For Controlling An Apparatus, Such As A Fuel Injector, Using Electronic Trimming, the specification of which

- ☐ is attached hereto.
- ☒ was filed on May 28, 1999 as reissue application number 09 / 322,770 and was amended on 2/21/01 and 3/21/01.  
(If applicable)

I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.  
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.  
I verily believe the original patent to be wholly or partly inoperative or invalid, for the reasons described below. (Check all boxes that apply.)

- ☐ by reason of a defective specification or drawing.
- ☒ by reason of the patentee claiming more or less than he had the right to claim in the patent.
- ☐ by reason of other errors.

At least one error upon which reissue is based is described as follows:

The original patent is partly inoperative for failing to include a device claim.

RECEIVED  
AUG 16 2001  
TECHNOLOGY CENTER R3700

(REISSUE APPLICATION DECLARATION BY THE INVENTOR, page 2)

Docket Number (Optional)  
 87-146R

All errors corrected in this reissue application arose without any deceptive intention on the part of the applicant. As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

Name(s)	Registration Number
Michael McNeil	35,949
Michael Huber	44,783
Larry Cain	31,150

Correspondence Address: Direct all communications about the application to:

☐ Customer Number

OR

Type Customer Number here

Place Customer Number Bar  
 Code Label here

<input checked="" type="checkbox"/> Firm or Individual Name	Michael McNeil				
Address	Liell & McNeil Attorneys PC				
Address	P.O. Box 2417				
City	Bloomington	State	TN	ZIP	47402
Country	United States				
Telephone	812-333-5355	Fax	812-333-3173		

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine and imprisonment, or both, under 18 U.S.C. 1001, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this declaration is directed.

Full name of sole or first inventor (given name, family name)  
 Ronald D. Shinogle

Inventor's signature

Residence  
 Peoria, Illinois

Date

Post Office Address  
 1023 W. Centennial Drive

Citizenship  
 US

Full name of second joint inventor (given name, family name)  
 Stephen F. Glassey

Inventor's signature

Date

Residence  
 Gulnare, Colorado

Citizenship  
 US

Post Office Address  
 21750 Spirit Mountain D

Full name of third joint inventor (given name, family name)  
 Richard A. De Keyser

Inventor's signature

Date

Residence  
 Edelstein, Illinois

Citizenship  
 US

Post Office Address

614 Horshoe Tr.

☒ Additional joint inventors are named on separately numbered sheets attached hereto.

RECEIVED

AUG 16 2001

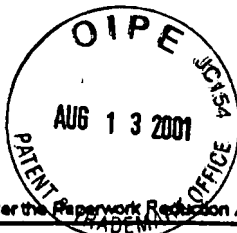
TECHNOLOGY CENTER R3700

Reissue Application Declaration (continued)

Docket Number  
87-146R

Full name of fourth joint inventor: Vernon Smith  
Inventor's Signature: Vernon R. Smith  
Residence: Peoria, Illinois  
Date: 7/31/01  
Post Office Address: 708 Mossville Rd.  
Citizenship: US

Full name of fifth joint inventor: Yasser A. Charif  
Inventor's Signature: \_\_\_\_\_  
Residence: Farmington Hills, Michigan  
Date: \_\_\_\_\_  
Post Office Address: 37655 Blossom Lane  
Citizenship: US



Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Approved for use through 9/30/00. OMB 0651-0033  
Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

## REISSUE APPLICATION DECLARATION BY THE INVENTOR

Docket Number (Optional)

87-146R

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is described and claimed in patent number 5,634,448, granted June 3, 1997, and for which a reissue patent is sought on the invention entitled Method And Structure For Controlling An Apparatus, Such As A Fuel Injector, Using Electronic Trimming, the specification of which

☐ is attached hereto.

☒ was filed on May 28, 1999 as reissue application number 09 / 322,770 and was amended on 2/21/01 and 3/21/01.  
(If applicable)

I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I verily believe the original patent to be wholly or partly inoperative or invalid, for the reasons described below. (Check all boxes that apply.)

☐ by reason of a defective specification or drawing.

☒ by reason of the patentee claiming more or less than he had the right to claim in the patent.

☐ by reason of other errors.

At least one error upon which reissue is based is described as follows:

The original patent is partly inoperative for failing to include a device claim.

RECEIVED

AUG 16 2001

TECHNOLOGY CENTER R3700

[Page 1 of 3]

Burden Hour Statement: This form is estimated to take 0.5 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

46

(REISSUE APPLICATION DECLARATION BY THE INVENTOR, page 2)

Docket Number (Optional)  
 87-146R

All errors corrected in this reissue application arose without any deceptive intention on the part of the applicant. As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

Name(s)	Registration Number
Michael McNeil	35,949
Michael Huber	44,783
Larry Cain	31,150

Correspondence Address: Direct all communications about the application to:

☐ Customer Number

OR

Type Customer Number here

Place Customer Number Bar  
 Code Label here

<input checked="" type="checkbox"/> Firm or Individual Name	Michael McNeil			
Address	Liell & McNeil Attorneys PC			
Address	P.O. Box 2417			
City	Bloomington	State	IN	ZIP 47402
Country	United States			
Telephone	812-333-5355	Fax	812-333-3173	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine and imprisonment, or both, under 18 U.S.C. 1001, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this declaration is directed.

Full name of sole or first inventor (given name, family name)  
 Ronald D. Shinogle

Inventor's signature

Residence  
 Peoria, Illinois

Date

Post Office Address  
 1023 W. Centennial Drive

Citizenship  
 US

Full name of second joint inventor (given name, family name)  
 Stephen F. Glassey

Inventor's signature

Date

Residence  
 Gulnare, Colorado

Citizenship  
 US

Post Office Address  
 21750 Spirit Mountain D

Full name of third joint inventor (given name, family name)  
 Richard A. De Keyser

Inventor's signature

Date

Residence  
 Edelstein, Illinois

Citizenship  
 US

Post Office Address

614 Horshoe Tr.

☒ Additional joint inventors are named on separately numbered sheets attached hereto.

YL

Reissue Application Declaration (continued)

Docket Number  
87-146R

Full name of fourth joint inventor: Vernon Smith  
Inventor's Signature: \_\_\_\_\_  
Residence: Peoria, Illinois  
Date: \_\_\_\_\_  
Post Office Address: 708 Mossville Rd.  
Citizenship: US

Full name of fifth joint inventor: Yasser A. Charif  
Inventor's Signature: Yasser Charif ~~\_\_\_\_\_~~  
Residence: Farmington Hills, Michigan  
Date: 8/1/2001  
Post Office Address: 37655 Blossom Lane  
Citizenship: US